Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in i	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE	Statement covers period from03/18/2006 through05/20/2006	Date of election if applicable: MAY 2 6 2006 (Month, Day, Year) REGISTRAR OF VOTERS 06/06/2006 By Deputy Page of 43 Page Of 43 Page Of 43 The page Of 43
General Purpose Committee Sponsored Small Contributor Committee	implete Parts 1, 2, 3, and 4. Irimarily Formed Ballot Measure Committee Controlled Sponsored Jos Complete Part 6) Irimarily Formed Candidate/ Ifficeholder Committee Joso Complete Part 7)	2. Type of Statement: Preelection Statement
3. Committee Information COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Norby for Supervisor STREET ADDRESS (NO P.O. BOX)	NUMBER 1237231	Treasurer(s) NAME OF TREASURER Betty Presley MAILING ADDRESS
CITY STATE ZIP COL	THE TODE!	CITY STATE ZIP CODE AREA CODE/PHONE NAME OF ASSISTANT TREASURER, IF ANY MAILING ADDRESS
OPTIONAL: FAX / E-MAIL ADDRESS	DE AREA CODE/PHONE	CITY STATE ZIP CODE AREA CODE/PHONE OPTIONAL: FAX / E-MAIL ADDRESS
I. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California Executed on	By Signature of Control By Signature Sky	Alledge the information contained herein and in the attached schedules is true and complete. I certify Fignature of Tedsurer or Assistant Treasurer Jilling Officeholder, Candidate, State Measure Proponent Jignature of Controlling Officeholder, Candidate, State Measure Proponent Jignature of Controlling Officeholder, Candidate, State Measure Proponent

COVER	PAGE -	PART 2
ALIFORNIA		

CALIFORNIA 460

Page 2 of 43

Officerolder of Cardidate Co	ontrolled Committee	6. Primarily	Formed Ballot	Measure	Committee		
NAME OF OFFICEHOLDER OR CANDIDA	ME		LOT MEASURE				
Chris Norby							
OFFICE SOUGHT OR HELD (INCLUDE LO Board of Supervisors County of Orange	OCATION AND DISTRICT NUMBER IF APPLICABLE)	BALLOT NO.	OR LETTER	JURISDICTION	ON		SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO	O. AND STREET) CITY STATE ZIP	Identify the	controlling offic	eholder, ca	ndidate, or state	measure p	roponent, if a
		NAME OF OF	FICEHOLDER, CAND	IDATE, OR PR	ROPONENT		
Related Committees Not Inc. not included in this statement that ar contributions or make expenditures of	luded in this Statement: List any committees re controlled by you or are primarily formed to receive on behalf of your candidacy.	OFFICE SOU	GHT OR HELD	·	DIS	STRICT NO. IF	ANY
COMMITTEE NAME	I.D. NUMBER					-	
	1						
NAME OF TREASURER	CONTROLLED COMMITTEE?	7. Primarily officeholder	Formed Candi (s) or candidate(s)	idate/Offic for which thi	ceholder Comi is committee is pri	mittee <i>Lis</i> imarily forme	t names of ed.
COMMITTEE ADDRESS STREET		officeholder	Formed Candi (s) or candidate(s) FICEHOLDER OR CA	for which thi	ceholder Comris committee is pri	imarily forme	ed.
COMMITTEE ADDRESS STREET	YES NO	NAME OF OF	(s) or candidate(s)	for which thi	s committee is pri	Marily forme	SUPPORT OPPOSE
NAME OF TREASURER COMMITTEE ADDRESS STREET CITY COMMITTEE NAME	ADDRESS (NO P.O. BOX)	NAME OF OF	(S) Or Candidate(S) FICEHOLDER OR CA	NDIDATE	OFFICE SOUGHT	OR HELD	sd.
COMMITTEE ADDRESS STREET CITY COMMITTEE NAME	ADDRESS (NO P.O. BOX) STATE ZIP CODE AREA CODE/PHONE I.D. NUMBER	NAME OF OF	(s) or candidate(s)	NDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET CITY COMMITTEE NAME NAME OF TREASURER	TADDRESS (NO P.O. BOX) STATE ZIP CODE AREA CODE/PHONE I.D. NUMBER CONTROLLED COMMITTEE? YES NO	NAME OF OF	(S) Or Candidate(S) FICEHOLDER OR CA	NDIDATE NDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET CITY COMMITTEE NAME NAME OF TREASURER	TADDRESS (NO P.O. BOX) STATE ZIP CODE AREA CODE/PHONE I.D. NUMBER CONTROLLED COMMITTEE?	NAME OF OF	(S) Or Candidate(S) FICEHOLDER OR CA FICEHOLDER OR CA	NDIDATE NDIDATE	OFFICE SOUGHT OFFICE SOUGHT	OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE

Campaign Disclosure Statement Summary Page

If this is a termination statement, Line 16 must be zero.

Cash Equivalents and Outstanding Debts

17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$

19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$

Type or print in ink. Amounts may be rounded to whole dollars.

SUMMARY PAGE

CALIFORNIA

Statement covers period

		from	03/18/2006	FORM TOO
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		through	05/20/2006	Page _ 3 of _ 43
Norby for Supervisor				I.D. NUMBER 1237231
Contributions Received	Column A TOTAL THIS PERIOD (FROMATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Sum Running in Both the	mary for Candidates e State Primary and
Monetary Contributions Schedule A, Line 3	\$40,963.05	\$55,338.05	General Elections	
Loans Received	0.00 \$40,963.05	0.00 \$ 55,338.05	20. Contributions	rough 6/30 7/1 to Date
4. Nonmonetary Contributions Schedule C, Line 3	0.00	0.00	21. Expenditures	s
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 Expenditures Made	\$ 40,963.05	\$55,338.05	Made \$	\$
6. Payments Made Schedule E, Line 4	\$133,369.87	\$161,655.15	Expenditure Limit S Candidates	Summary for State
7. Loans Made	0.00 \$ 133,369.87	0.00 \$ 161,655.15	22. Cumulative	Expenditures Made* Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)	0.00	0.00	Date of Election (mm/dd/yy)	Total to Date
11. TOTAL EXPENDITURES MADE		0.00 \$161,655.15		- \$
Current Cash Statement 12. Beginning Cash Balance				\$
12. Beginning Cash Balance	\$ <u>210,152.37</u> <u>40,963.05</u>	To calculate Column B, add amounts in Column A to the		
14. Miscellaneous Increases to Cash	0.00	corresponding amounts from Column B of your last	*Amounts in this section ma reported in Column B.	ay be different from amounts
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	133,369.87 117,745.55	report. Some amounts in Column A may be negative figures that should be	1	

0.00

0.00

subtracted from previous period amounts. If this is the first report being filed

for this calendar year, only

carry over the amounts

any).

from Lines 2, 7, and 9 (if

Schedule A **Monetary Contributions Received**

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period

worletal y	Contributions Received	to	whole dollars.	from03/18/2	CA	IFORNIA FORM	460
SEE INSTRUCTIO	ONS ON REVERSE			through05/20/2	2006 Pag	e4	of 43
NAME OF FILER				 			
Norby for Si	upervisor				1	NUMBER 37231	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	To	ELECTION O DATE EQUIRED)
04/18/2006	Adams Steel	□IND □COM 図OTH □PTY □SCC		100.00	100.00	P 06	1,500.00
05/18/2006	AFSCME Local 2076	□IND □COM 図OTH □PTY □SCC		350.00	350.00	P 06	850.00
03/29/2006	Pradeep (Peter) Agarwal	⊠IND □COM □OTH □PTY □SCC	Banker Citizens Business Bank	500.00	500.00	P 06	1,250.00
05/16/2006	Analytical Planing Service, Inc.	□IND □COM ③OTH □PTY □SCC		250.00	250.00	P 06	250.00
05/16/2006	Raymond C. Andersen	⊠IND □COM □OTH □PTY □SCC	PR Consultant RCA Consulting	250.00	250.00	P 06	250.00
			SUBTOTAL \$	1,450.00	ten parti de la comuni		
1. Amount re (Include al	A Summary ceived this period – itemized monetary contributions. I Schedule A subtotals.)				OTH - Othe	ual pient Comm or than PTY or (e.g., bus	ittee or SCC) iness entity)
3. Total mone	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Colu				PTY – Politic SCC – Smal	al Party Contributor	Committee
					FPP	C Form 46	N /.lanuary/05\

Type or print in ink.

Amounts may be rounded to whole dollars

SCHEDULE A (CONT.)

monetal y	Contributions Received	to whole		Statement cov			FORN ORM	^A 460
NAME OF FILER				through <u>05/20/2</u>	006	Page.	5 JMBER	of <u>43</u>
Norby for St	pervisor					1237		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR		R ELECTION TO DATE REQUIRED)
05/07/2006	Anderson Enrichment	☐IND ☐COM 図OTH ☐PTY ☐SCC		100.00	10	00.00	P 06	125.00
05/14/2006	Jerald E. Andrews	⊠IND □COM □OTH □PTY □SCC	Corp Officer Andrews Rancho Del Norte, Inc	500.00	50	00.00	P 06	500.00
05/14/2006	Victor L. Bangle	☑IND □COM □OTH □PTY □SCC	Retired None	50.00	10	00.00	P 06	100.00
04/18/2006	Mr. Q.R. Barnes	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired None	100.00	10	00.00	P 06	200.00
05/20/2006	Berg Electric Corporation 1e	□IND □COM 図OTH □PTY □SCC		500.00	50	00.00	P 06	1,350.00
			SUBTOTAL \$	1,250.00	Higher than the first			

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

NAME OF FILER

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A (CONT)

Statement covers period from03/18/2006	CALIFORNIA 460
through <u>05/20/2006</u>	Page 6 of 43
	I.D. NUMBER
	1007001

Norby for Supervisor 1237231 FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR DATE IF AN INDIVIDUAL, ENTER AMOUNT **CUMULATIVE TO DATE** CONTRIBUTOR PER ELECTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER) OCCUPATION AND EMPLOYER RECEIVED **RECEIVED THIS** CALENDAR YEAR CODE * TODATE (IF SELF-EMPLOYED, ENTER NAME **PERIOD** (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) 05/19/2006 Mr. Randy Bergum XIND Owner 500.00 500.00 P 06 Псом 650.00 P 02 500.00 □oтн Bergum Construction □ PTY □ SCC 05/14/2006 Fay L. Bowman XIND Homemaker 100.00 200.00 P 06 ПСОМ 200.00 P 04 100.00 Потн None **□PTY** □scc 05/16/2006 Brion May Consulting □IND 250.00 250.00 P 06 250.00 СОМ MTO X □PTY □scc 05/07/2006 Mr. George Bushala, Jr **XIND** Developer 150.00 150.00 P 06 ПСОМ 300.00 Потн Bushala Brothers **□PTY** □scc 05/16/2006 Cabco Yellow Inc. **□IND** 250.00 250.00 P 06 1,000.00 ПСОМ X OTH □ PTY □scc SUBTOTAL\$

*Contributor Codes IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other (e.g., business entity) PTY - Political Party SCC - Small Contributor Committee

1,250.00

Type or print in ink.

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,		to whole d		Statement co	vers period	CALIFO	RNIA	400	İ
				from03/18/	2006	CALIFOI FORI	M	460	
NAME OF FILER				through <u>05/20/</u>	2006	Page	7 of_	43	!
Norby for Su	pervisor				-	I.D. NUMBE 1237231			
DATE	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER	AMOUNT	CHAIN ATIVE TO		550 5: 4		

RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER	l			
05/16/2006		CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	To	ELECTION O DATE REQUIRED)
1	Care Ambulance Service, Inc.	☐IND ☐COM ☑OTH ☐PTY ☐SCC		750.00	750.00	P 06	750.00
	CHPAC - California Hospital Association PAC (#790773)	□IND ☑COM □OTH □PTY □SCC		500.00	500.00	P 06	500.00
05/16/2006	Eric D. Christen	□COM □OTH □PTY	Co-Director Coalition for Fair Employment in Construction	250.00	250.00	P 06	250.00
	Paul Cleary	□COM □OTH	Retired None	500.00	500.00	P 06	600.00
04/26/2006 J	John E. Collins	Сом	Retired None	50.00	100.00	P 06	100.00
			SUBTOTAL \$	2,050.00			

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SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)
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CALIFORNIA

FORM

Statement covers period

03/18/2006

NAME OF FILER Norby for Supervisor					through <u>05/20/2006</u>			of43
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		TODATE	
05/16/2006	Committee for Improved Public Policy (#860849)	☐IND IXCOM ☐OTH ☐PTY ☐SCC		250.00	2	50.00	P 06	1,250.00
05/14/2006	Connex/ATC	□IND □COM ☑OTH □PTY □SCC		250.00	2	50.00	P 06	250.00
05/07/2006	Cornell Norby Fine Art	□IND □COM 図OTH □PTY □SCC		250.00	2	50.00	P 06	250.00
05/16/2006	William Richard Cramer	☑IND □COM □OTH □PTY □SCC	CFO/Owner Star Milling Co.	500.00	7:	50.00	P 06	750.00
04/07/2006	Mr. William Dannemeyer	⊠IND □COM □OTH □PTY □SCC	Attorney Bill Dannemeyer	100.00	10	00.00	P 06	200.00

SUBTOTAL \$

1,350.00

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IND - Individual

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(other than PTY or SCC)
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Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA FORM

Statement covers period

from ____03/18/2006

NAME OF FILER				through _05/20/2	006 Pag	e 9	_ of <u>43</u>		
Norby for S	upervisor				i	I.D. NUMBER 1237231			
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		ER ELECTION TO DATE F REQUIRED)		
04/18/2006	Mr. John Davis	☑IND □COM □OTH □PTY □SCC	Retired None	100.00	100.00) P06	150.00		
04/18/2006	James Dehaan	IND ☐COM ☐OTH ☐PTY ☐SCC	Engineer Halan Industries	100.00	100.00	P 06	200.00		
05/16/2006	Mr. William Dehn	⊠IND □COM □OTH □PTY □SCC	Engineer CH2MHill	500.00	500.00	P 06	1,500.00		
04/18/2006	Mr. Conrad DeWitte	⊠IND □COM	Broker Lender CD Financial Services	250.00	350.00	P 06	550.00		
05/19/2006	Charles Diamond	□COM □OTH	Real Estate Management Charles Diamond, Real Estate Management	50.00	100.00	P 06	125.00		
			SUBTOTAL \$	1,000.00	3117 St 11		Property.		

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OTH - Other (e.g., business entity)

PTY - Political Party

Type or print in ink.

Amounts may be rounded to whole dollars.

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CALIFORNIA A A

Statement covers period

				from03/18/2006		FORM 460		
				through <u>05/20/2</u>	006	Page	10 of 4	13
NAME OF FILER Norby for Su	pervisor				· ·	I.D. NUM		
						123723	31	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YEA (JAN. 1 - DEC. 3	AR	PER ELECT TO DATE (IF REQUIR	
05/16/2006	Noelle Donfeld	⊠IND □COM □OTH □PTY □SCC	Accountant Kelly, Donfeld, Rollman Law Firm	150.00	150	0.00 P	06 6	550.00
04/18/2006	Mrs. Margaret Dudley	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired None	100.00	100	0.00 P	06 2	200.00
05/07/2006	Mr. Richard Erganian	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Property Management Richard Erganian	100.00	100	0.00 P	06 3	300.00
05/16/2006	Faubel Public Affairs	□IND □COM 図OTH □PTY □SCC		250.00	250	0.00 P	06 2	250.00
05/14/2006	Mr. C. Robert Ferguson	⊠IND □COM □OTH □PTY □SCC	Lawyer Cleve Robert Fergsuson	100.00	100).00 P	06 3	00.00
			SUBTOTAL S	700.00	State of said	i salan i		

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(other than PTY or SCC)
OTH – Other (e.g., business entity)
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SCC – Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

03/18/2006

from.

SUBTOTAL \$

2,850.00

NAME OF FILER				through <u>05/20/2</u>	006	Page.	11	of43
Norby for St	upervisor					I.D. NL 1237		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR		R ELECTION TO DATE REQUIRED)
03/24/2006	Anthony Florentine	⊠IND □COM □OTH □PTY □SCC	Retired None	500.00	1,0	00.00	P 06	1,100.00
04/18/2006	Anthony Florentine	☑IND □COM □OTH □PTY □SCC	Retired None	500.00	1,0	00.00	P 06	1,100.00
05/16/2006	Juan Y. Forster	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Consultant Paramount Petroleum Corporation	100.00	1	00.00	P 06	100.00
05/14/2006	Patricia Garrett Taylor	⊠IND □COM □OTH □PTY □SCC	Vice President STA Campaigns	1,500.00	1,5	00.00	P 06	1,500.00
05/16/2006	Gill Electronic, Inc.	□IND □COM 図OTH		250.00	2!	50.00	P 06	500.00

□PTY □SCC

*Contributor Codes

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Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period

		to whole	dollars.	from 03/18/2	·	ALIFORI FORM	
NAME OF FILER				through <u>05/20/2</u>	006 P	age12	of <u>43</u>
Norby for Su	pervisor				j	D. NUMBER 1237231	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DA CALENDAR YEA (JAN. 1 - DEC. 31	R	PER ELECTION TO DATE IF REQUIRED)
05/14/2006	Goe & Porsythe, LLP	□IND □COM ☑OTH □PTY □SCC		1,000.00	1,000	.00 P06	1,000.00
05/16/2006	Shiv Grewal	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Attorney Stradling Yocca Carlson & Rauth	250.00	250	.00 P06	500.00
04/18/2006	Mr. Richard Gunter	⊠IND □COM □OTH □PTY □SCC	Retired None	300.00	550	.00 P06	1,000.00
05/05/2006	Hearthside Homes Inc	⊠IND □COM □OTH □PTY □SCC		250.00	0.	00 P06	1,500.00
05/20/2006	Hearthside Homes Inc	⊠IND □COM □OTH □PTY □SCC		-250.00	0.	00 P 06	1,500.00
			SUBTOTAL \$	1,550.00		urae h	Many of some and the control

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Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

03/18/2006

from.

NAME OF FILER		-		through _05/20/2	006	Page	13	of43	
Norby for St	upervisor	·					I.D. NUMBER 1237231		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	ŀ	R ELECTION TO DATE REQUIRED)	
05/16/2006	Hok, Inc.	☐IND ☐COM 図OTH ☐PTY ☐SCC		500.00	51	00.00	P 06	1,500.00	
04/18/2006	Mary B. Homme	☑IND □COM □OTH □PTY □SCC	Homemaker None	50.00	19	50.00	P 06	250.00	
04/18/2006	Richard L. Hopping, O.D.	☑IND □COM □OTH □PTY □SCC	Retired None	100.00	2(00.00	P 06	200.00	
05/16/2006	Iger & Associates, Inc.	□IND □COM 図OTH □PTY □SCC		250.00	2!	50.00	P 06	500.00	
05/18/2006	Inet Airport Systems	□IND □COM 図OTH □PTY □SCC		250.00	29	50.00	P 06	750.00	
			SUBTOTAL S	1 150 00	100				

*Contributor Codes IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars

SCHEDULE A (CONT.)

0	Amounts may be rounded		
	to whole dollars.	Statement covers period	CALIFORNIA ACO
		from <u>03/18/2006</u>	FORM 460
		through _05/20/2006	Page 14 of 43
			I.D. NUMBER
			1237231

							1237231			
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	1	RELECTION TO DATE REQUIRED)			
04/18/2006	Mr. Patrick Jackson	⊠IND □COM □OTH □PTY □SCC	Retired	150.00	200.00	P 06	275.00			
05/14/2006	Joshua Grading & Excavating Inc.	□IND □COM ☑OTH □PTY □SCC		500.00	500.00	P 06	750.00			
05/16/2006	Hassan Kheradmandan	⊠IND □COM □OTH □PTY □SCC	Real Estate BiCentennial	100.00	100.00	P 06	350.00			
	Mr. Benjamin Kim	Сом	Owner Spring Field Banquet	100.00	100.00	P 06	200.00			
04/18/2006	Stephen R. Knott	□сом □отн	Retired None	100.00	100.00	P 06	550.00			
			SUBTOTAL \$	950.00						

*Contributor Codes

IND - Individual

NAME OF FILER

Norby for Supervisor

COM - Recipient Committee

(other than PTY or SCC)
OTH - Other (e.g., business entity)

PTY - Political Party

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

from ____03/18/2006

				•				
				through <u>05/20/2</u>	006	Page_	15	of <u>43</u>
NAME OF FILER								
Norby for Su	pervisor					I.D. NU	MBER	
						1237	231	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IFSELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR		R ELECTION TO DATE REQUIRED)
04/18/2006	David Kramer	⊠IND □COM □OTH □PTY □SCC	Structural Engineer Kramer & Lawson, Inc.	500.00	51	00.00	P 06	1,500.00
05/14/2006	Leighton Consulting, Inc.	□IND □COM ☑OTH □PTY □SCC		250.00	2!	50.00	P 06	850.00
05/07/2006	Steven F. Lewis	⊠IND □COM □OTH □PTY □SCC	Publishing Steven F. Lewis	100.00	1(00.00	P 06	100.00
05/16/2006	LSA Associates	☐IND ☐COM ☑OTH ☐PTY ☐SCC		250.00	29	0.00	P 06	750.00
03/29/2006	LSF II Fullerton, LLC	□IND □COM ☑OTH □PTY □SCC		-249.00	1,25	51.00	P 06	1,500.00
			SUBTOTALS	953.00	State of the		, pe	

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PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.

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SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

				from03/18/2	006	FC	ORM	400
				through <u>05/20/2</u>	006	Page _	16	of43
NAME OF FILER Norby for Su	pervisor						MBER 231	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO E CALENDAR YEA (JAN. 1 - DEC. 3	AR	٦	RELECTION FO DATE REQUIRED)
04/30/2006	Mrs. Betty Lundgren	⊠IND □COM □OTH □PTY □SCC	Retired None	50.00	150.00		P 06	200.00
05/14/2006	Willa Dean Lyon	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Chairman & CEO William Lyons Homes, Inc.	1,500.00	1,500.00		P 06	1,500.00
04/18/2006	Mr. James McBride	⊠IND □COM □OTH □PTY □SCC	CPA James McBride, CPA	250.00	250	0.00	P 06	600.00
04/18/2006	Anna Y. McDonnel	⊠IND □COM □OTH □PTY □SCC	Homemaker None	100.00	100	0.00	P 06	300.00
04/26/2006	Mel Smith Electric, Inc.	□IND □COM 図OTH □PTY □SCC		500.00	500	0.00	P 06	750.00
			SUBTOTAL	2,400.00	and the first			i kana jawa

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Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period

3,150.00

		to whole	dollars.	from03/18/2	-	CALI F	FORNI DRM	460
NAME OF FILER				through <u>05/20/2</u>	006	Page_	17	of <u>43</u>
Norby for S	upervisor					I.D. NU 1237		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	DATE AR	PER	ELECTION TO DATE REQUIRED)
05/09/2006	Raquel Munoz	☑IND □COM □OTH □PTY □SCC	Homemaker None	1,000.00			P 06	1,500.00
05/20/2006	Alfred Neely	☑IND □COM □OTH □PTY	President Archstone-Smtih	1,500.00	1,50	0.00	P 06	1,500.00
05/07/2006	Kendall D. Neisess	□SCC ⊠IND □COM □OTH □PTY	Retired None	50.00	10	0.00	P 06	100.00
05/16/2006	NTSI - National Traffic Safety Institute	SCC IND COM SOTH PTY SCC		500.00	500	0.00	P 06	1,500.00
04/18/2006	Odle & Associates	□IND □COM ☑OTH □PTY □SCC		100.00	100	0.00	9 06	100.00
			SUBTOTAL \$	3 150 00		*		

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PTY - Political Party

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA A A

Statement covers period

				from <u>03/18/2</u>	006	FC	DRM	460
NAME OF FILER				through <u>05/20/2</u>	006	Page_	18	of <u>43</u>
Norby for St	pervisor					1.D. NUI 12372		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	٦	ELECTION TO DATE REQUIRED)
05/14/2006	Pacific Life	☐IND ☐COM ☑OTH ☐PTY ☐SCC	·	500.00	50	0.00	P 06	1,000.00
05/07/2006	Pardee Homes	☐IND ☐COM 図OTH ☐PTY ☐SCC		1,000.00	1,00	0.00	P 06	1,500.00
04/18/2006	Mr. Robert Patterson	⊠IND □COM □OTH □PTY □SCC	Retired None	50.00	10	0.00	P 06	150.00
05/16/2006	Mr. Thomas Peters	☑IND □COM □OTH □PTY □SCC	Manager CH2MHill	250.00	25	0.00	P 06	1,500.00
05/14/2006	Petrone, Inc.	□IND □COM ဩOTH □PTY □SCC		249.00	24:	9.00	P 06	1,499.00
			SUBTOTAL S	2,049.00	25.612.73.42.		State 1	\$ \$ 10, 12 to \$ 2.75

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Type or print in ink.

Amounts may be rounded to whole dollars.

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FORM

Statement covers period

03/18/2006

from ___

NAME OF FILER		· · · · · · · · · · · · · · · · · · ·		through <u>05/20/2</u>	006	Page_		of43
Norby for Su	pervisor					1237		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR		R ELECTION TO DATE REQUIRED)
05/16/2006	Primary and Multi-Specialty Clinics of Anaheim, Inc.	☐IND ☐COM ☑OTH ☐PTY ☐SCC		500.00	50	0.00	P 06	500.00
04/20/2006	Rainbow Disposal Co., Inc.	□IND □COM ☑OTH □PTY □SCC		100.00	10	0.00	P 06	1,500.00
05/14/2006	RBF Consulting	□IND □COM 図OTH □PTY □SCC		250.00	25	0.00	P 06	1,000.00
04/18/2006	Louis Reichman	⊠IND □COM □OTH □PTY □SCC	Retired None	50.00	12	5.00	P 06	305.00
04/26/2006	Ms. Michele Blair Revelle	⊠IND □COM □OTH □PTY □SCC	Principal Blair Revell Communications	100.00	10	0.00	P 06	350.00
			SUBTOTAL S	1,000.00	green vi		C P	77 T 47 E

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PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink. Amounts may be rounded to whole dollars

SCHEDULE A (CONT.)

	·	to whole	dollars.	Statement cov			FORNI ORM	^A 460
NAME OF FILER				through <u>05/20/2</u>	006	Page .	20	of <u>43</u>
Norby for Su	pervisor						MBER	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR		RELECTION FO DATE REQUIRED)
03/24/2006	Paul A. Riffel, Sr.	IND COM OTH PTY SCC	Retired Retired	100.00		00.00	P 06	100.00
05/16/2006	RMC, Inc.	□IND □COM ☑OTH □PTY □SCC		250.00	25	0.00	P 06	500.00
04/18/2006	Mr. Robert Root	⊠IND □COM □OTH	Retired	50.00	10	0.00	P 06	150.00
05/14/2006	Mr. Robert Root	⊠IND □COM □OTH □PTY □SCC	Retired None	50.00	10	0.00	P 06	150.00
05/07/2006	Mr. Reed Royalty	□сом □отн	Owner Reed Royalty Public Affairs	250.00	250	0.00	P 06	1,000.00
			SUBTOTAL \$	700.00	Official Maria			

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SCC - Small Contributor Committee

Type or print in ink. Amounts may be rounded to whole dollars.

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		to whole (Johans.	from03/18/2	006		RM	460
NAME OF FILER				through <u>05/20/2</u>	006	Page		of <u>43</u>
Norby for Su	pervisor				,	12372		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	TO	ELECTION D DATE EQUIRED)
04/18/2006	Harvinder Sahota	⊠IND □COM □OTH □PTY □SCC	Physician Harvinder Sahota, MD	500.00	50	00.00	P 06	1,500.00
03/29/2006	Sai Power Development	☐IND ☐COM 図OTH ☐PTY ☐SCC		500.00	50	00.00	P 06	500.00
04/18/2006	Dennis Salts	☑IND □COM □OTH □PTY □SCC	Board Member Magnolia School District	100.00	10	00.00	P 06	200.00
04/18/2006	Schaefer Ambulance Service, Inc.	☐IND ☐COM 図OTH ☐PTY ☐SCC		150.00	15	50.00	P 06	1,500.00
05/09/2006	Mrs. Betty Schoenberg	⊠IND □COM □OTH □PTY □SCC	Retired None	100.00	20	00.00	P 06	500.00
			SUBTOTAL	1,350.00	10000			

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PTY - Political Party

SCC - Small Contributor Committee

Statement covers period

Type or print in ink.

Amounts may be rounded

SCHEDULE A (CONT.)

		to whole	dollars.	Statement cov			IFORNI ORM	^A 460
NAME OF FILER				through <u>05/20/2</u>	006	Page	22	of <u>43</u>
Norby for S						I.D. N	UMBER 7231	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTERNAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	'EAR	1	R ELECTION TO DATE REQUIRED)
05/14/2006	Michael J. Schroeder	⊠IND □COM □OTH	Attorney Michael J. Schroeder, A	1,000.00	1,0	00.00	P 06	1,000.00
04/10/000	3 ,	□PTY □SCC	Professional Corporation				ĺ	
04/19/2006	Elizabeth Segerstrom	U-11	Homemaker None	1,500.00	1,50	00.00	P 06	1,500.00
05/16/2006	Ronald Shenkman	□SCC 図IND □COM □OTH	Chairman	250.00	29	50.00	P 06	800.00
		□PTY □SCC	Rainbow Disposal Co					
05/16/2006	Skyline Capital Management, LLC	□IND □COM 図OTH □PTY □SCC		500.00	50	00.00	P 06	750.00
05/16/2006	Spernak Campaign Management	□IND □COM ③OTH □PTY □SCC		100.00	10	0.00	P 06	100.00

SUBTOTAL \$

3,350.00

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Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

				from03/18/2	006	F(ORM	400
NAME OF FILER				through <u>05/20/2</u>	006			of <u>43</u>
Norby for Su	pervisor					I.D. NU 1237		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	TO	ELECTION D DATE EQUIRED)
04/18/2006	Stockstill Communications	□IND □COM 図OTH □PTY □SCC		249.00	24	19.00	P 06	498.00
04/18/2006	Mr. Roger Stull	⊠IND □COM □OTH □PTY □SCC	Retired	500.00	50	0.00	P 06	1,500.00
04/18/2006	Sukut Construction Inc.	☐IND ☐COM 図OTH ☐PTY ☐SCC		500.00	50	00.00	P 06	1,500.00
05/16/2006	Telecom Partners Group Corp.	□IND □COM ☑OTH □PTY □SCC		500.00	50	00.00	P 06	500.00
05/14/2006	Mary Lou Terranova	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired None	100.00	10	0.00	P 06	100.00
			SUBTOTAL \$	1,849.00		No wife	14. 3	e programa

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Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIEODNIA

Statement covers period

				from03/18/2	1006	FORM	460
NAME OF FILER			·	through <u>05/20/2</u>	006	Page2	4 of 43
Norby for Su	pervisor					I.D. NUMBER 1237231	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTERNAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YEA (JAN. 1 - DEC. S	\R	PER ELECTION TO DATE (IF REQUIRED)
05/16/2006	Tesla Associates, LLC	☐IND ☐COM 図OTH ☐PTY ☐SCC		200.00	200	P 06	450.00
05/14/2006	The Brutoco Companies/Roberto G. Brutocao	□IND □COM ☑OTH □PTY □SCC		500.00	500	.00 P06	1,500.00
05/03/2006	The Family Action PAC (#1225424)	☐IND 図COM ☐OTH ☐PTY ☐SCC		1,500.00	1,500	.00 P06	1,500.00
05/16/2006	The Sheldon Group	□IND □COM ☑OTH □PTY □SCC		250.00	0	.00 P06	500.00
04/18/2006	Mr. Larry Thomas	⊠IND □COM □OTH □PTY □SCC	Executive The Irvine Company	150.00	400	.00 P06	500.00
			SUBTOTAL \$	2,600.00			

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Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

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NAME OF FILER				through <u>05/20/2</u>	006	Page_	25	of <u>43</u>
Norby for Su	pervisor					I.D. NUI 1237:		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	1	ELECTION TO DATE REQUIRED)
05/07/2006	Mr. Larry Thomas	⊠IND □COM □OTH □PTY □SCC	Executive The Irvine Company	250.00	40	0.00	P 06	500.00
05/16/2006	Keith Thompson	☑IND □COM □OTH □PTY □SCC	Principal Gensler	250.00	25	0.00	P 06	250.00
04/18/2006	Paulette Triay	⊠IND □COM □OTH □PTY □SCC	Retired None	100.00	15(0.00	P 06	500.00
04/18/2006	Cheryl Vanachoelandt	⊠IND □COM □OTH	Retired None	100.00	100	0.00	P 06	100,00
04/26/2006	Lynn Anne Vaughan	□COM □OTH	President Academy of Defensive Driving	1,250.00	1,250	0.00	P 06	1,250.00
			SUBTOTAL \$	1,950.00	HAVE NO			

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Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.) CALIFORNIA 460

Statement covers period

				from03/18/2	006	F	ORM	400
NAME OF FILER				through <u>05/20/2</u>	006	Page_	26	of <u>43</u>
Norby for Su	pervisor					I.D. NU 1237		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTERNAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR		R ELECTION TO DATE REQUIRED)
05/14/2006	Margaret Waters	⊠IND □COM □OTH □PTY □SCC	Public Relations Magnuson & Waters	250.00	25	50.00	P 06	250.00
05/16/2006	Western Medical Center - Santa Ana	☐IND ☐COM ☑OTH ☐PTY ☐SCC		1,500.00	1,50	0.00	P 06	1,500.00
04/18/2006	Kay M. Weymouth	⊠IND □COM □OTH □PTY □SCC	Director, Local Elected Officials Republican Party of Orange County	100.00	10	0.00	P 06	350.00
04/18/2006	Steven White	図IND □COM □OTH □PTY □SCC	Real Estate Broker White Realty	250.00	25	0.00	P 06	600.00
05/14/2006	John Williams	⊠IND □COM □OTH □PTY □SCC	Public Administrator County of Orange	250.00	25	0.00	P 06	1,300.00
			SUBTOTAL \$	2,350.00				

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Type or print in ink.

SCHEDULE A (CONT.)

		to whole dollars.		Statement cov			FORNIA ORM	460
NAME OF FILER				through <u>05/20/2</u>	006	Page.	27	of <u>43</u>
Norby for Su	pervisor					I.D. NU		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE * OCCUPATION AND EMPLOYE (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)		AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		R YEAR TO DATE	
04/18/2006	John Woodhouse Davis	IND COM OTH PTY SCC	Urologist Fullerton Urology	100.00	10	0.00	P 06	300.00
03/19/2006	Deborah Rosenthal Zimmerman	⊠IND □COM □OTH □PTY □SCC	Attorney Cox, Castle & Nicholson	250.00	25	0.00	P 06	250.00
		□IND □COM □OTH □PTY □SCC						
		☐IND ☐COM ☐OTH ☐PTY ☐SCC						
		☐IND ☐COM ☐OTH ☐PTY ☐SCC						
			SUBTOTAL \$	350.00	No section of			

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SCC - Small Contributor Committee

Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees		Type or print in Amounts may be r to whole dolla	ounded	Statement covers from03/18/2		CALIFORNIA 46	
SEE INSTRUCTIONS ON REVERSE				through05/20/2	006	Page _	28 of43
Norby for S	Supervisor					I.D. NUN 12372	MBER
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVI CALENDA (JAN. 1 - D	R YEAR	PER ELECTION TO DATE (IF REQUIRED)
05/19/2006	Republican Party of Orange County	Monetary Contribution Nonmonetary Contribution Independent		1,250.00		,250.00	
	X Support ☐ Oppose ☐ Support ☐ Oppose	Expenditure Monetary Contribution Nonmonetary Contribution Independent Expenditure					
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
			SUBTOTAL	\$ 1,250.00			er ger granden. Geregor som state
. Itemized co	D Summary ontributions and independent expenditures made	this period. (Include all	Schedule D subtotals.).			\$ _	1,250.00
. Onicinize	d contributions and independent expenditures ma	de this period of under \$	\$100			\$	0.00

Schedule E Payments Made

Type or print in ink. Amounts may be rounded to whole dollars.

	SCHEDULE E
Statement covers period	CALIFORNIA 460
from03/18/2006	FORM 40U
through	Page of43
	I.D. NUMBER
	1222221

SEE INSTRUCTIONS ON REVERSE			thro	uah 05/20/2006			20 .	43
NAME OF FILER				ough	Pag	NUME		43
Norby for Supervisor					i '	37231		
CODES: If one of the following codes accurately describes the payment we		A Ab						
CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* legal defense LIT campaign literature and mailings FCD OFC office expenses FAD petition circulating FHO phone banks FOL polling and survey research FNO postage, delivery and messenger services FNO professional services (legal, accounting) VOT			RAD RFD SAL TEL TRC TRS TSF VOT	escribe the payme radio airtime and prod returned contributions campaign workers' sa t.v. or cable airtime an candidate travel, lodgistaff/spouse travel, lot transfer between comvoter registration information technology	uction costs laries d production ng, and meals dging, and me mittees of the	s eals e same		ate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE	OR	DESCRIPTION	N OF PAYMENT			AMOL	INT PAID
AMS Response	LIT					+	3	,739.49
AMS Response								
Response	LIT					\top	6	,607.22
Ace Flowers	FND							
								134.69
				*				
* Payments that are contributions or independent expenditures must also be summ	arized on §	chedule D.			SUBTOTA	<u> </u>		
Schedule E Summary					3081012		10	,481.40
-								
Itemized payments made this period. (Include all Schedule E subtotals.) Unitemized payments made this period of under \$100.	••••••	•••••••••••••••••••••••••••••••••••••••	•••••	•••••••••••	\$		133,2	35.29
Unitemized payments made this period of under \$100 Total interest paid this period on loops. (Enter any water a 2 days).			•••••	••••••••••••	\$		1	34.58
Part 1	I, Column	(e).)			e			0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on th	ie Summa	ry Page, Columi	n A, Line 6.)		TOTAL S		133.30	S9 87

Schedule F

SCHEDULE	E (CONT.)
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(Continuation Shoot) Type or prin					1-4	SCHEDULE E (CONT.		
(Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.			Si	tatement covers period	CALIFORNIA 460		
- aymonto made				from	03/18/2006	FOF	RM TOO	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER				throu	gh05/20/2006	Page _	30 of 43	
Norby for Supervisor						I.D. NUME	3ER	
CODEC. 16						12372	31	
CODES: If one of the following codes accurately describe CMP campaign paraphernalia/misc. CNS campaign consultants contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense campaign literature and mailings	MTG meetings and office expen petition circul PHO phone banks POL polling and s postage, deli	munications d appearance ses lating survey reseavery and m	ces	RAD RFD SAL TEL TRC TRS TSF VOT		on costs s oduction costs and meals g, and meals ees of the sar	me candidate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DE	SCRIPTIO	N OF PAYMENT		AMOUNT PAID	
Antonello Ristorante		FND				,	2,571.78	
Betty Presley & Associates, Inc.								
		PRO					850.00	
Betty Presley & Associates, Inc.								
e e e e e e e e e e e e e e e e e e e		PRO					850.00	
CA Voter Guide (#595004)			Slate Card					
 		LIT					2,550.00	
COPS Voter Guide (#599014)		LIT	Slate Card				2,028.00	
							2,028.00	
Payments that are contributions or independent expenditures must also	be summarized on S	ichedule D.	<u> </u>		6	UDTOTAL		
					S	UBTOTAL \$	8,849.78	

Schedule E

SCHEDULE E (CONT.)

(Continuation Sheet) Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER Norby for Supervisor	Type or print in ink. Amounts may be rounded to whole dollars.			from 03/18 through 05/20	CALIFO FOR	31 of 43 BER
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MBR member community meetings and office expen petition circult PHO phone banks POL polling and s postage, deli	munications I appearance ses ating urvey reseau very and me	es	RAD radio airtime a returned cont SAL campaign wo TEL t.v. or cable a TRC candidate trav. TRS staff/spouse t transfer betwee VOT voter registra	and production costs ributions rkers' salaries irtime and production cost rel, lodging, and meals ravel, lodging, and meals een committees of the sa	me candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR D	ESCRIPTION OF PAYMENT		AMOUNT PAID
CRA Voter Guide (#902368)		LIT	Slate Card			3,800.32
California Club for Growth Newsletter (#1279517)		LIT	Slate Card			2,520.00
California Taxpayers Alliance (#1285763)		LIT	Slate Card			1,282.00
Coalition for Senior Citizen Security (#592015)		LIT	Slate Card			2,927.00
Copyright Printing		LIT				700.38
Payments that are contributions or independent expenditures must als	o be summarized on S	Schedule D.			SUBTOTAL	11,229,70

Schedule E (Continuation Sheet)

Type or print in ink. Amounts may be rounded

Statement covers period

(Continuation Sheet) Payments Made	Amounts may be rounde to whole dollars.			from 03/18/2006	CALIFO	^{RNIA} 460
SEE INSTRUCTIONS ON REVERSE NAME OF FILER Norby for Supervisor				through 05/20/2006	Page I.D. NUMBE 123723	
LEG legal defense PRO professional LT campaign literature and mailings PRT print ads			s	uction costs laries d production costs ig, and meals ging, and meals	e candidate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE (DR DE	ESCRIPTION OF PAYMENT		AMOUNT PAID
Data Plus Imagination, Inc.		LIT				3,661.66
Family Faith & Freedom Association (#1270781)		LIT	Slate Card			1,694.16
G. Strahan & Associates, Inc.		LIT				8,364.65
G. Strahan & Associates, Inc.		LIT				15,518.39
JC Evans, Inc.		LIT				650.00
Payments that are contributions or independent expenditures must als	so be summarized on	Schedule D.			SUBTOTAL \$	29 888 86

Schedule E

SCHEDUL	E E (CONT.)
---------	-------------

(Continuation Chart)	type or print in link.			- 64	Statement covers period			GOLFEDOEL E (COM)		
(Continuation Sheet)	Amounts may be rounded to whole dollars.			31	atement cove	's period	CALIFOR	460		
Payments Made	to whole go	iidis.		from.	03/18	/2006	FORM	400		
SEE INSTRUCTIONS ON REVERSE				throu	gh <u>05/20</u>	/2006	Page	33 of 43		
Norby for Supervisor							I.D. NUMBER	?		
							1237231			
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense campaign literature and mailings	MBR member com MTG meetings and OFC office expen PET petition circul PHO phone banks POL polling and s POS postage, deli	munications d appearance ses lating survey reseal very and me	es	RAD RFD SAL TEL TRC TRS TSF VOT	radio airtime a returned cont campaign wo t.v. or cable a candidate tray staff/spouse t transfer betwe voter registra	and production ributions rkers' salaries irtime and production rel, lodging, and ravel, lodging, een committee	costs duction costs d meals and meals s of the same	, candidate/sponsor nail)		
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR D	ESCRIPTION	OF PAYMENT			AMOUNT PAID		
JC Evans, Inc.		LIT						965.49		
Jagerhaus Restaurant										
		FND						790.00		
Lewis Consulting Group										
c		CNS						2,500.00		
Lewis Consulting Group										
		CNS						2,500.00		
NSON Opinion Research		POL						3,327.00		
Payments that are contributions or independent expenditures must al	lso be summarized on S	Schedule D.				SU	BTOTAL \$	10,082.49		

Schodule F

(Continuation Sheet) Payments Made	Type or print Amounts may be to whole do	rounded		Statement covers period from 03/18/2006	CALIFOR	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER				through 05/20/2006	Page	34 of 43
Norby for Supervisor					I.D. NUMBE 1237231	
CODES: If one of the following codes accurately describe CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MBR member community meetings and office expen. PET petition circul phone banks POL polling and s postage, deli	munications I appearance ses ating urvey reseavery and m	ces	RAD radio airtime and production returned contributions SAL campaign workers' salarie t.v. or cable airtime and production returned contributions campaign workers' salarie t.v. or cable airtime and production returned in the salarie t.v. or cable airtime and production reconstitution information technology cost radio airtime and production reconstitution reconstitution reconstitution returned returned returned reconstitution reconstitution reconstitution returned returned returned reconstitution returned return	on costs es oduction costs and meals g, and meals ees of the same	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DE	SCRIPTION OF PAYMENT		AMOUNT PAID
Cherie Navarro		CNS				1,750.00
Nello Cucina		FND				845.00
Non-Partisan Candidate Evaluation Council, Inc. (#588002)		LIT	Slate Card			2,400.00
Mr. Chris Norby	į	POS				42.95
Mr. Chris Norby		FND				542.94
Payments that are contributions or independent expenditures must als	o be summarized on S	Schedule D.		S	UBTOTAL \$	5.580.89

Schedule E

SCHEDIH E E (CONT.)

(Continuation Sheet) Payments Made	Type or print Amounts may b to whole do	e rounded		Star	tement covers period 03/18/2006	CALIFORNIA 46	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER				throug	h05/20/2006	Page	35 of 43
Norby for Supervisor						123723	
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations CRIL candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense campaign literature and mailings	MBR member com MTG meetings and OFC office expen PET petition circul PHO phone banks POL polling and s POS postage, deli	imunications d appearance ises lating s survey resear	es	RAD r RFD r SAL c TEL t TRC c TRS s TSF tr	describe the payment adio airtime and productio eturned contributions campaign workers' salaries v. or cable airtime and propulation and the campaign workers' lodging, a staff/spouse travel, lodging ransfer between committer oter registration information technology cos	n costs s oduction costs nd meals , and meals es of the sam	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION	OF PAYMENT		AMOUNT PAID
Official Non-Partisan Voter Guide (#1277947)		LIT	Slate Card				1,900.00
Orange County Property Rights Coalition (#1285728)		LIT	Slate Card				2,251.20
Parents Ballot Guide (#1226502)		LIT	Slate Card				1,875.00
Phyllis Schneider & Associates							
e godenne.		CNS					1,563.00
Phyllis Schneider & Associates		CNS					1,563.00
Payments that are contributions or independent expenditures must als	o he summarized on S	Schodula D					
		ochequie U.			Sl	JBTOTAL \$	9,152.20

Schedule E	Type or print	im imi				9	SCHEDULE E (CONT.)	
(Continuation Sheet) Amounts may be rounded			State	ement covers period				
Payments Made	to whole dollars.				03/18/2006	CALIFORNIA 460		
-				from	03/10/2008	, ,		
SEE INSTRUCTIONS ON REVERSE				through	05/20/2006	Page	36 of 43	
NAME OF FILER						I.D. NUME		
Norby for Supervisor						12372		
CODES: If one of the following codes accurately describe	s the navment v	OU May o	ntor the sade. Oth		- 4 4			
diripagn parapricitialia/illisc.	MBR membercom	munications	inter the code. Oth					
CNS campaign consultants CTB contribution (explain nonmonetary)*	MTG meetings and	d appearance	es		dio airtime and productio turned contributions	n costs		
CVC civic donations	OFC office expen PET petition circul			SAL ca	impaign workers' salarie:	S		
FIL candidate filing/ballot fees FND fundraising events	PHO phone banks	;		TEL t.v	 or cable airtime and pro indidate travel, lodging, a 	duction cost:	5	
fundraising events independent expenditure supporting/opposing others (explain)*	POL polling and s POS postage, deli	urvey resear	rch	TRS sta	aff/spouse travel, lodging	and meals		
LEG legal detense	PRO professional	services (led	essenger services gal, accounting)	TSF tra	ansfer between committe oter registration	es of the sar	ne candidate/sponsor	
பா campaign literature and mailings	PRT print ads		,,	WEB in	formation technology cos	ls (internet, e	-mail)	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DES	SCRIPTION O	F PAYMENT		AMOUNT PAID	
Phyllis Schneider & Associates								
							ı	
		OFC					59.52	
Phyllis Schneider & Associates								
		FND					138.39	
<u> </u>								
Phyllis Schneider & Associates				-				
		FND						
							152.21	
Placentia Chamber of Commerce								
•		}					240.00	
		cvc					240.00	
PoliticalCalling.com								
		PHO				1	E 000 00	
		l				ļ	5,000.00	
		1						
Payments that are contributions or independent expenditures must also	he summarized on S	Sahadula D						
, , smaller and mast also	ummanized on s	mieduje D.			St	JBTOTAL \$	5,590.12	

Schedule E

Continuation Sheet) Payments Made	Amounts may be to whole dol	rounded		State	ement covers period 03/18/2006	CALIFO FOR	
EEE INSTRUCTIONS ON REVERSE				through	05/20/2006	Page	37 of 43
Norby for Supervisor						I.D. NUMBI 123723	
CODES: If one of the following codes accurately described campaign paraphernalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MBR member community meetings and office expension petition circul. PHO phone banks POL polling and s POS postage, delivered.	munications i appearances ses ating urvey researd very and mes	S	RAD re RFD re SAL c TEL t. TRC c. TRS s TSF tr	escribe the payment. adio airtime and production eturned contributions ampaign workers' salaries v. or cable airtime and production andidate travel, lodging, an laff/spouse travel, lodging, ansfer between committee oter registration formation technology costs	duction costs d meals and meals s of the sam	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE C	DR D	DESCRIPTION	OF PAYMENT		AMOUNT PAID
Republican Party of Orange County (#742088)		СТВ				 	1,250.00
Right on Time Signs							
. 3		СМР					1,750.00
Right on Time Signs							
		CMP					1,750.00
Save Proposition 13 (#598040)		· · · · · · · · · · · · · · · · · · ·	Slate Card				·
		LIT					2,270.00
Tony Siciliani	:	LIT					7,297.00
Payments that are contributions or independent expenditures must al	lso be summarized on	Schedule D.			SU	BTOTAL \$	14,317.00

Schedule F

SCHEDITIE E (CONT.)

(Continuation Sheet) Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER Norby for Supervisor	Type or print Amounts may be to whole do	e rounded Ilars.		Statement covers period from03/18/2006 through05/20/2006	CALIFORNIA FORM Page 38 of 43 I.D. NUMBER 1237231	
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations CRL candidate filing/ballot fees FND independent expenditure supporting/opposing others (explain)* LEG legal defense LTC campaign literature and mailings	MBR member com MTG meetings an OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, deli	munications d appearance ses lating survey resear very and me	s	RAD radio airtime and productions RFD returned contributions SAL campaign workers' salarie TEL t.v. or cable airtime and pi TRC candidate travel, lodging, a TRS staff/spouse travel, lodgin	on costs es roduction costs and meals g, and meals ees of the same candidate/spons	sor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	DR DE	SCRIPTION OF PAYMENT	AMOUNT PAID	
Tony Siciliani		LIT			4,683.6	6
Tony Siciliani		LIT			12,829.2	0
Sign Strategies		СМР			3,000.0	o
Sign Strategies		CMP			2,856.9	9
Team California (#598036)		LIT	Slate Card		1,148.0	0
Payments that are contributions or independent expenditures must als	so be summarized on	Schedule D.		S	SUBTOTAL \$ 24.517.89	==

Schedule F

SCHEDULI	E (CONT.)
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(Continuation Sheet) Payments Made	Type or print Amounts may be to whole do	rounded		Statemer from	ot covers period	CALIFOI FOR	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		·		through	05/20/2006	Page	39 of 43
Norby for Supervisor						I.D. NUMBE 123723	
CODES: If one of the following codes accurately described campaign paraphernalia/misc. campaign consultants CTB contribution (explain nonmonetary)* civic donations FIL candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MBR member community meetings and office expen-petition circul PHO phone banks POL polling and s postage, deli	munications I appearance ses ating urvey resear very and me	s	RAD radio a RFD returno SAL campa TEL t.v. or TRC candiol TRS staff(s) TSF transfe	ribe the payment. airtime and production aid contributions lign workers' salaries cable airtime and producte ate travel, lodging, and bouse travel, lodging, or between committee registration ation technology costs	duction costs d meals and meals s of the sam	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	Walter and the same of the sam	CODE	DR DI	ESCRIPTION OF PA	YMENT		AMOUNT PAID
The Early Voter (#1264931)		LIT	Slate Card				1,245.00
Your Ballot Guide (#588011)		LIT	Slate Card				2,300.00
Payments that are contributions or independent expenditures must als	o be summarized on \$	Schedule D.			SU	BTOTAL \$	3 545 00

Schedule G	
Payments N	lade by an Agent or Independent
	on Behalf of This Committee)

independent expenditure supporting/opposing others (explain)*

ND

LEG

legal defense

campaign literature and mailings

Type or print in ink. Amounts may be rounded to whole dollars.

<u>.</u>		S	CHEDULE G
Statem	ent covers period	CALIFORNIA	400
from	03/18/2006	CALIFORNIA FORM	400
41	05/20/2006		

transfer between committees of the same candidate/sponsor

WEB information technology costs (internet, e-mail)

VOT voter registration

SEE INSTRUCTIONS ON REVERSE		through05/20/2006	Page40 of43
IAME OF FILER			
Norby for Supervisor			I.D. NUMBER 1237231
NAME OF AGENT OR INDEPENDENT CONTRACTOR			<u> </u>
AMS Response			
CODES: If one of the following codes accurately desc MP campaign paraphernalia/misc.			
CNS campaign consultants	MBR member communications MTG meetings and appearances	RAD radio airtime and production	costs
CTB contribution (explain nonmonetary)*	OFC office expenses	RFD returned contributions SAL campaign workers' salaries	
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and prod	uction costs
FIL candidate filing/ballot fees FND fundraising events	PHO phone banks	TRC candidate travel, lodging, and	meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, a	and meals

postage, delivery and messenger services

professional services (legal, accounting)

POS

PRO

PRT print ads

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
US Postmaster	LIT		3,739.49
			3,739.43
US Postmaster	LIT		6,607.22
			0,007.22
			ļ
ttach additional information on appropriately labeled continuation she	ets.		TOTAL* \$ 10.346.21

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

TOTAL* \$

10,346.71

Schedule G	
Payments N	lade by an Agent or Independent
	on Behalf of This Committee)

Type or print in ink. Amounts may be rounded to whole dollars.

		SCHEDULE (
Staten	nent covers period	CALIFORNIA 460
from	03/18/2006	FORM 40U
through_	05/20/2006	Page41 of43
		I.D. NUMBER
		1237231

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Norby for Supervisor

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Mr. Chris Norby

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc. CNS campaign consultants

CTB contribution (explain nonmonetary)* CVC civic donations

candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)*

legal defense LEG LIT campaign literature and mailings

member communications MTG meetings and appearances

OFC office expenses PET petition circulating

PHO phone banks POL polling and survey research

postage, delivery and messenger services professional services (legal, accounting)

PRT print ads RAD radio airtime and production costs

returned contributions SAL campaign workers' salaries

t.v. or cable airtime and production costs candidate travel, lodging, and meals

staff/spouse travel, lodging, and meals

transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet, e-mail)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
OC Performing Arts Pavillion	FND			542.94
				}

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

542.94

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule G	
Payments N	lade by an Agent or Independent
Contractor (on Behalf of This Committee)

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE (
Statement covers period	CALIFORNIA ACO
from 03/18/2006	FORM 400
through 05/20/2006	Page42 of43
	I.D. NUMBER
	1237231

Norby for Supervisor

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Phyllis Schneider & Associates

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

print ads

PRT

CMP campaign paraphernalia/misc. MBR
CNS campaign consultants MTG
CTB contribution (explain nonmonetary)* OFC
CVC civic donations PET
FIL candidate filing/ballot fees PHO
FND fundraising events POL
IND independent expenditure supporting/opposing others (explain)* POS

independent expenditure supporting/opposing others (explain)*
legal defense

LIT campaign literature and mailings

MBR member communications RAD radio airtime and production costs meetings and appearances RFD returned contributions

returned contributions
C office expenses SAL campaign workers' salaries
T petition circulating TEL t.v. or cable airtime and production costs
O phone banks TRC candidate travel, lodging, and meals

polling and survey research
postage, delivery and messenger services
professional services (legal, accounting)

TRS
staff/spouse travel, lodging, and meals
transfer between committees of the same candidate/sponsor
voter registration

WEB information technology costs (internet, e-mail)

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Great Dane Bakery	FND			105.00
US Postmaster	POS			138.39
ttach additional information on an interest to the little				

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

243.39

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule G	
Payments Ma	de by an Agent or Independent
Contractor (c	n Behalf of This Committee)

Type or print in ink. Amounts may be rounded

	SCHEDULE G
Statement covers period rom03/18/2006	CALIFORNIA 460

Contractor (on Behalf of This Committee)	to whole dollars.	from03/18/2006	FORM 460
SEE INSTRUCTIONS ON REVERSE		through <u>05/20/2006</u>	Page 43 of 43
NAME OF FILER Norby for Supervisor			I.D. NUMBER 1237231
NAME OF AGENT OR INDEPENDENT CONTRACTOR Tony Siciliani			
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings * Payments that are contributions exclusive accurately described	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT postage.	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and prod TRC candidate travel, lodging, and staff/spouse travel, lodging, and	costs Juction costs Jucals Jand meals Softhe same candidate/sponsor

that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	
S Postmaster	POS	TOTAL HONOR PAINTEN	AMOUNT PAID
	Pos		3,718.6
S Postmaster	POS		3,775.2
	1 1		1

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

7,493.86

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.